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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | First name |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Middle name White | Middle name |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| | Only the last 4 digits of your Social | XXX - XX3689 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Vocie First Name | White Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Chicago Illinois 60636 City State Zip Code | City State Zip Code |
| | Cook | Oity State Zip Gode |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: Over the last 180 days before filing this petition, I have | Check one: Over the last 180 days before filing this petition, I have |
| to file for bankruptcy | lived in this district longer than in any other district. | lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |
| | | |

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| Debtor | | | White | Case number (if knd | own) |
|---|--|--|---|--|---|
| | First Name | Middle Name | Last Name | | |
| Part 2: | Tell the Court Abo | ut Your Bankruptcy Ca | ise | | |
| Ban | chapter of the akruptcy Code you choosing to file ler | | lescription of each, see <i>Notice Req</i> | | |
| 8. Hov fee | v you will pay the | more details about I cashier's check, or may pay with a cred I need to pay the feal Individuals to Pay 1 I request that my feal individuals to pay the official poverty I you choose this option | how you may pay. Typically, if y money order. If your attorney is lit card or check with a pre-print ee in installments. If you choos your Filing Fee in Installments (Cee be waived (You may request or required to, waive your fee, ar line that applies to your family s | ou are paying the submitting your red address. e this option, sign official Form 103 this option only and may do so onlize and you are used. | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| ban | ve you filed for kruptcy within the 8 years? | Ves. District District District | WhenWhen | MM / DD / YYYY | Case number Case number Case number |
| cas beir spo filin you par | any bankruptcy ses pending or ng filed by a use who is not g this case with , or by a business tner, or by an liate? | Yes. Debtor District Debtor District | <u>W</u> her | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| | you rent your idence? | ✓ No. Go to Yes. Fill out | ord obtained an eviction judgment a line 12. It <i>Initial Statement About an Eviction</i> ankruptcy petition. | | st You (Form 101A) and file it with |

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White Debtor 1 Vocie __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Vocie
 White
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Vocie White Signature of Debtor 1 Signature of Debtor 2 Executed on _ 2/2/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Vocie | | White | Case number (if | known) |
|--|----------------------------|-----------------------|---------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the llso certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | (and, in a case in v | vhich § 707(b)(4)(D) applies, certify that I |
| represented by an | • • | | | ules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | ' |
| need to file this page. | /s/ Alicia Haro | | Date | 2/2/2018 |
| | Signature of Attorney for | or Debtor | | M / DD / YYYY |
| | g | = 55.50 | | |
| | | | | |
| | Alicia Haro | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | aharo@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Vocie | | White |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|---|---|
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| | \$16,225.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$16,225.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$23,569.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$10,908.00 |
| Your total liabilities | \$34,477.00 |
| | |
| Commonity Very Income and Empares | |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) | \$2,796.00 |
| · | \$2,796.00 |

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| Deb | otor 1 Vocie | | White | Case number (if known) | |
|-------------|--|------------------------------|---|---|----------|
| | First Name | Middle Name | Last Name | | |
| Part | 4: Answer These Ques | tions for Administrat | tive and Statistical Record | ds | |
| 6. / | Are you filing for bankruptcy | under Chapters 7, 11, o | r 13? | | |
| | No. You have nothing to r | eport on this part of the fo | orm. Check this box and submit | this form to the court with your other sch | edules. |
| | ✓ Yes. | | | | |
| 7. V | What kind of debt do you hav | e? | | | |
| | | | imer debts are those incurred by Fill out lines 8-10 for statistical p | an individual primarily for a personal, urposes. 28 U.S.C. § 159. | |
| ı | Your debts are not prime this form to the court with | | ou have nothing to report on this | s part of the form. Check this box and sul | omit |
| | From the Statement of Your | | ne: Copy your total current mont form 122C-1 Line 14. | thly income from Official | \$840.00 |
| 9. | Copy the following special | categories of claims fro | om Part 4, line 6 of Schedule I | E/F: | |
| | From Part 4 on Schedule E | /F, copy the following: | | Total claim | |
| | 9a. Domestic support obliga | ions (Copy line 6a.) | | \$0.00 | |
| | 9b. Taxes and certain other of | ebts you owe the govern | ment. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for death or person | nal injury while you were | intoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. Student loans. (Copy line | e 6f.) | | \$0.00 | |
| | 9e. Obligations arising out or priority claims. (Copy line 6g. | 1 0 | or divorce that you did not repor | t as \$0.00 | |
| | 9f. Debts to pension or profit | -sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to ide | entify your case: | | | | | | |
|--|--|---|---|----------------------------|--|--------------------|--|--|
| Dalata u 1 | Vasia | | | | \A/I_ :+ _ | | | |
| Debtor 1 | Vocie First Name | | Middle Nar | me | White Last Name | | | |
| Debtor 2 | line) = | | | | <u> </u> | | | |
| (Spouse, if fil | ing) First Name | | Middle Nar | me | Last Name | | | |
| United Sta | ates Bankruptcy Co | ourt for the: Nort | hern | | District of Illinois (State) | | | |
| Case num | ber | | | | <u> </u> | | | |
| | J. Fayres 100 | | | | | | | Check if this is an |
| | ıl Form 106 | | | | | | | amended filing |
| Sched | dule A/B: | Property | | | | | | 12/1 |
| category v responsibl write your | where you think is e for supplying con name and case i | t fits best. Be as correct informationumber (if known | complete and n. If more spa). Answer eve | d acci ace is ery qu | | ole are this fo | filing together, both a rm. On the top of any a | re equally |
| | | | _ | | Other Real Estate You Own or H | | | |
| | No. Go to Part 2 | legal or equitab | le interest in | any r | esidence, building, land, or similar pr | operty | j? | |
| | Yes. Where is the | proporty? | | | | | | |
| ш | res. Where is the | property: | , | M/ba+ | in the property? Check all that apply | | Do not doduct accurad | claims or exemptions. Put |
| 1.1 | | | | | is the property? Check all that apply. ngle-family home | | the amount of any secu | red claims on Schedule D: |
| | Street address, if | available, or other o | description | | uplex or multi-unit building | | Creditors Who Have Cla | ims Secured by Property. |
| | - | | | Ħ c | ondominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | М | anufactured or mobile home | | | |
| | Number Stre | et | | ш ' | and | | Describe the nature o | f vour ownership |
| | | | | _ | vestment property meshare | | interest (such as fee s | simple, tenancy by |
| | City | State Zip | Code | | ther | | the entireties, or a life | e estate), if Known. |
| | | | | Who l one. | nas an interest in the property? Check | < | Check if this is co (see instructions) | mmunity property |
| | | | | | ebtor 1 only | | Ш | |
| | | | Ī | De | ebtor 2 only | | | |
| | | | | De | ebtor 1 and Debtor 2 only | | | |
| | | | Ì | At | least one of the debtors and another | | | |
| | | | | | information you wish to add about thety identification number: | nis ite | m, such as local | |
| If you | own or have more | than one, list here | | р. оро | rty racinimoation names : | | | |
| | | | 1 | What | is the property? Check all that apply. | | | claims or exemptions. Put |
| 1.2 | Street address, if | available, or other o | description | | ngle-family home | | | red claims on Schedule D: ims Secured by Property. |
| | | | | _ | uplex or multi-unit building | | Current value of the | Current value of the |
| | | | | _ | ondominium or cooperative anufactured or mobile home | | entire property? | portion you own? |
| | | | | ш | and | | | |
| | Number Stre | eet | | In | vestment property | | Describe the nature o interest (such as fee s | |
| | City | State Zir | Code | | meshare ther | | the entireties, or a life | |
| | Oity | Otato Zip | oodc | | | | Chack if this is an | mmunity property |
| | | | | Who h | nas an interest in the property? Check | (| (see instructions) | minumity property |
| | | | Ì | | ebtor 1 only | | ш | |
| | | | i | | ebtor 2 only | | | |
| | | | i | De | ebtor 1 and Debtor 2 only | | | |
| | | | ĺ | At | least one of the debtors and another | | | |
| | | | | | information you wish to add about thety identification number: | nis ite | m, such as local | |

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| Debtor 1 | Vocie | | White Case numl | Der (if known) | |
|----------------------------------|--|---------------------------|---|--|---|
| | First Name | Middle Name | Last Name | | |
| 1.3 Stre | et address, if available, or of | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nun | nber Street State | Zip Code | Land Investment property Timeshare Other | Describe the nature of interest (such as fee sthe entireties, or a life. | imple, tenancy by |
| | | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter | (see instructions) | initiality property |
| | the dollar value of the pove attached for Part 1. W | | property identification number: all of your entries from Part 1, including any entr here. ▶ | ies for pages | |
| Oo you own to ou own to cars, va | nat someone else drives. If ns, trucks, tractors, sport u | equitable interes | st in any vehicles, whether they are registered or , also report it on Schedule G: Executory Contracts an ircycles | | |
| 3.1 | s Make Model: Year: | Buick LaCrosse 2006 | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: 2006 Buick LaCrosse | 300000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$4500.00 | Current value of the portion you own? \$4500.00 |
| 3.2 | Make Model: Year: | Ford Focus 2013 | Check if this is community property (see instructions) Who has an interest in the property? Check one. | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: |
| | Approximate mileage: Other information: 2013 Ford Focus | 60000 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$7750.00 | Current value of the portion you own? |
| | | | Check if this is community property (see instructions) | | |

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| | Vocie First Name | Middle Name | Last Name | Case number | | |
|------|---|-------------|--|--|---|--|
| 3.3 | Make Model: Year: Approximate mileage: | | Who has an interest in the pone. Debtor 1 only | roperty? Check | | red claims on Schedule ims Secured by Propert |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 onl | lv | Current value of the entire property? | Current value of the portion you own? |
| | Other information. | | At least one of the debtors | • | | |
| | | | L | | | |
| | | | Check if this is communi instructions) | ity property (see | | |
| 3.4 | Make | | Who has an interest in the p | roperty? Check | Do not deduct secured | • |
| | Model: | | one. | | the amount of any secu Creditors Who Have Cla | |
| | Year: Approximate mileage: | | Debtor 1 only | | Creditors Will Have Cla | ums secured by Fropen |
| | Approximate inileage. | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 onl | .y | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | ity property (see | | |
| Exar | | • | er recreational vehicles, other t t, fishing vessels, snowmobiles, m | • | | |
| Exar | nples: Boats, trailers, motors No | • | | notorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, m | notorcycle accessori | Do not deduct secured | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, m Who has an interest in the p one. | notorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | who has an interest in the pone. | notorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only | notorcycle accessori property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 onl | notorcycle accessori property? Check ly and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinstructions) Who has an interest in the p | property? Check by and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule ims Secured by Propert Current value of the portion you own? |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communicative instructions) Who has an interest in the pone. | property? Check by and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule control of the portion you own? claims or exemptions. I |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Other information: Make Model: Year: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only | property? Check by and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | claims or Schedule of the portion you own? |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | property? Check and another ity property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims or schedule portion you own? claims or exemptions. It is claims or exemptions. It is claims or schedule with Secured by Propertions Secured by Propertions of the Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Other information: Make Model: Year: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | property? Check and another ity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule ims Secured by Propent Current value of the portion you own? claims or exemptions. If the claims on Schedule ims Secured by Propentities. |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | property? Check and another ity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims or schedule portion you own? claims or exemptions. It is claims or exemptions. It is claims or schedule with Secured by Propertions Secured by Propertions of the Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | property? Check and another ity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims on Schedule portion you own? claims or exemptions. I ured claims on Schedule pims Secured by Propertion you of the portion you own? |

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| De | ebtor 1 | Vocie First Name | Middle Name | White Last Name | Case number (if known) | |
|--------------|-------------------------|-----------------------------------|--|---------------------------------|----------------------------------|--|
| Pa | rt 3: | | our Personal and Household I | | | |
| D | o you | own or hav | e any legal or equitable intere | est in any of the following | g items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Examp | _ | and furnishings liances, furniture, linens, china, kitche | enware | | |
| <u> </u> | No Yes. [| Describe | Living Room Set, Bedroom Set, Dini | ng Room Set | | \$800.00 |
| | | tronics bles: Televisions | s and radios; audio, video, stereo, an | d digital equipment; compute | ers, printers, scanners; music | |
| <u>✓</u> | | Describe | TV, Cellphone | | | \$350.00 |
| | Examp | • | ue und figurines; paintings, prints, or oth in, or baseball card collections; other | | | |
| | No Yes. [| Describe | | | | - |
| | | oles: Sports, ph | rts and hobbies otographic, exercise, and other hobb s; carpentry tools; musical instrumen | | tables, golf clubs, skis; canoes | |
| ✓ | No | - | | | | |
| Ш | Yes. I | Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and relate | ed equipment | | |
| ✓ | No Voc. I | Dogoribo | | | | 1 |
| ш | 165. 1 | Describe | | | | |
| | 1. Clo | | clothes, furs, leather coats, designer v | wear, shoes, accessories | | |
| ✓ | No Yes I | Describe | | | | |
| Ш | 100. 1 | 2000/180 | | | | |
| | | - | ewelry, costume jewelry, engagemen r | t rings, wedding rings, heirlod | om jewelry, watches, gems, | |
| | No Yes. [| Describe | | | | |
| ш | | | | | | |
| | | n-farm animal bles: Dogs, cats | s, birds, horses | | | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| | | other person | al and household items you did no | ot already list, including an | y health aids you did not list | |
| $oxed{oxed}$ | No Voc. 1 | Dagarib - | | | | |
| Ц | Yes. I | Describe | | | | |
| | | | lue of all of your entries from Part | t 3, including any entries fo | r pages you have attached | \$1150.00 |

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$300.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Fifth Third Checking \$2500.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Fifth Third Savings \$25.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb | tor 1 Vocie First Name | Middle Name | White | Case number (if known) | |
|-----|--|--|----------------------------|---|---|
| 20. | Government and corp Negotiable instruments | orate bonds and other negotia include personal checks, cashiers | checks, promissory no | tes, and money orders. | |
| | ✓ No Yes. Give specific | ents are those you cannot transfe | er to someone by signing | g or delivering them. | |
| | information about them | Issuer name: | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | |), thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | _ |
| | | Additional account: | | | _ |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, publi | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | _ |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | _ |
| | | | | | |

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| Debt | or 1 Vocie First Name | | number (if known) | |
|------|--|--|---|--|
| 24. | | Middle Name Last Name an education IRA, in an account in a qualified ABLE program, or under a quali | fied state tuition program | |
| | | 530(b)(1), 529A(b), and 529(b)(1). | | |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S. | .C. § 521(c): | |
| | | - | | |
| | | - | | |
| 25. | | table or future interests in property (other than anything listed in line 1), and refer your benefit | ights or powers | |
| | ✓ No | | | |
| | Yes. Desc | cribe | | |
| 0.0 | Detects con | | | 1 |
| 26. | | oyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements | | |
| | ✓ No | | | |
| | Yes. Desc | cribe | | |
| 0.7 | Licanosa fra | nahing and other garaged integrables | | 4 |
| 27. | | anchises, and other general intangibles illding permits, exclusive licenses, cooperative association holdings, liquor licenses, p | professional licenses | |
| | ✓ No | | | 7 |
| | Yes. Desc | cribe | | |
| | | | | 4 |
| | | | | |
| Mor | ney or propei | rty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or propei | | | portion you own? |
| | Tax refunds o | owed to you | Esteri | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give sabou | specific information ut them, including whether | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give sabout you a | specific information | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds or No Yes. Give sabout you a and to | specific information ut them, including whether already filed the returns the tax years | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds or No Yes. Give about your and to | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and to | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and fi Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and fi Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and fi Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and fi Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: ettlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp Soc | specific information ut them, including whether already filed the returns the tax years rt st due or lump sum alimony, spousal support, child support, maintenance, divorce s specific information ts someone owes you paid wages, disability insurance payments, disability benefits, sick pay, vacation pay, cial Security benefits; unpaid loans you made to someone else | State: Local: ettlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Vocie | | White | Case number (if known) | |
|------|---|---------------------------|---|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance paramples: Health, disabil | | alth savings account (HSA); credit, l | nomeowner's, or renter's insurance | |
| | No Yes. Name the insurant of each policy and list | | Company name: | Beneficiary: | Surrender or refund value |
| 32. | | of a living trust, expect | someone who has died proceeds from a life insurance police | cy, or are currently entitled to receive | |
| 33. | Claims against third pa | | you have filed a lawsuit or made urance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and uto set off claims No Yes. Describe | unliquidated claims o | f every nature, including counter | claims of the debtor and rights | |
| 35. | Any financial assets yo No Yes. Describe | u did not already list | | | |
| 36. | | - | m Part 4, including any entries f | | \$2825.00 |
| Part | _ | | | nterest In. List any real estate in Pa | t1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | y legal or equitable ir | iterest in any business-related p | roperty? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable on No Yes. Describe | commissions you ali | eady earned | | or oxomptions |
| 39. | ✓ No | | e, modems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, elec | ctronic devices |
| | Yes. Describe | | | | |

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| Deb | tor 1 Vocie | | Case number (if known) | |
|----------|--------------------------------|--|---------------------------|--|
| 10 | First Name | Middle Name Last Name | | |
| 40. | | oment, supplies you use in business, and tools of your trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41 | Inventory | | | |
| | - N | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 42. | Interests in partnerships | or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | - |
| | | | | <u> </u> |
| | | | | |
| 43. | Customer lists, mailing list | s, or other compilations | | |
| | ✓ No | | | |
| | | de personally identifiable information (as defined in 11 U.S.C. § 10 |)1(41A))? | |
| | <u> </u> | | | |
| | ☐ No | | | |
| | Yes. Describe. | | | |
| 44 | Any business-related prop | perty you did not already list | | |
| | | ,, | | |
| | ✓ No | | | |
| | Yes. Give specific information | | | |
| | infollitation | | | |
| | | · | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | _ |
| | | | | |
| | | f your entries from Part 5, including any entries for pages you ere | | |
| • | | | | |
| Part | Describe Any Farm | - and Commercial Fishing-Related Property You Ow | n or Have an Interest In. | |
| | If you own or have an inte | rest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any le | egal or equitable interest in any farm- or commercial fishing | -related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | s farms retard field | | |
| | Examples: Livestock, poultr | y, tarm-raised tish | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debt | tor 1 Vocie | | Vhite Cast Name | Case number (if known) | |
|--------------|--------------------------------|---|--------------------------|--------------------------------|--------------|
| 48. | Crops-either growing | | | | |
| | ✓ No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixture | es, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing suppl | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| E 1 | Any form, and common | rcial fishing-related property you did n | ant already list | | |
| 51. | | iciai iisiiiig-reiated property you did i | iot aiready list | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| | | l of your entries from Part 6, including | | ı have attached | |
| • | | | | L | |
| | | | | | |
| Part | Z. Describe All Pro | perty You Own or Have an Intere | st in That You Did Not I | I ist Δhove | |
| | | perty of any kind you did not already li | | | |
| | | s, country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | I of your entries from Part 7. Write that | at number here | | > |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | , line 2 | | > | |
| 56. r | oart 2 total vehicles, lin | e 5 | \$12250.00 | | |
| 57. P | art 3: Total personal an | d household items, line 15 | \$1150.00 | | |
| 58. P | art 4: Total financial as | sets, line 36 | \$2825.00 | | |
| 59. F | Part 5: Total business-re | elated property, line 45 | | | |
| 60. F | Part 6: Total farm- and f | ishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62. 1 | Fotal personal property. | Add lines 56 through 61 | \$16225.00 | Copy personal property total ▶ | + \$16225.00 |
| | | | | | \$16225.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | |

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| Official | Form 106C | | as Evampt | amended filing |
|---------------------|---------------------------|-------------|----------------------|--------------------|
| (If known) | | | | Check if this is a |
| Case number | | | | |
| | , , | - | (State) | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 1 | Vocie | | White | |

amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Clair | m as Exempt | | | | |
|--|---|---|---|---|--|--|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ven if your spouse is filing with you. | | | |
| You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | |
| 2. | For any property you list on Schedule A | I/B that you claim as e | exempt, fill in the information below. | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Buick LaCrosse, 2006, | \$4,500.00 | ▼ \$0 | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | |
| | 2006 Buick LaCrosse | | 100% of fair market value, up to any | | | |
| | Line from Schedule A/B: 03 | | applicable statutory limit | | | |
| | Brief description: Ford Focus, 2013, 2013 Ford Focus | \$7,750.00 | \$0 100% of fair market value, up to any | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | |
| | Line from Schedule A/B: 03 | | applicable statutory limit | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | |

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Debtor 1 Vocie White Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$2,500.00 description: **✓** \$2,500.00 Checking account, Fifth Third Checking 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$25.00 description: **✓** \$25.00 Savings account, Fifth 100% of fair market value, up to any Third Savings applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief description: \$300.00 **✓** \$300.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$800.00 description: \$800.00 Living Room Set, 100% of fair market value, up to any Bedroom Set, Dining applicable statutory limit Room Set Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$350.00 description: **✓** \$350.00

100% of fair market value, up to any

applicable statutory limit

TV, Cellphone

07

Line from

Schedule A/B:

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| Fill in | this information to identify your case | se: | | | |
|------------------|--|---|---------------------------|--------------------------|--------------------------------------|
| | • • | | | | |
| Debto | or 1 <u>Vocie</u> First Name | White Middle Name Last Name | | | |
| Debto | or 2 | | | | |
| (Spous | e, if filing) First Name | Middle Name Last Name | | | |
| United | d States Bankruptcy Court for the: | Northern District of Illinois (State) | | | |
| Case (If know | number vn) | | | | |
| Off | icial Form 106D | | | | Check if this is a amended filing |
| Scl | hedule D: Credito | ors Who Have Claims Secure | ed by Prop | erty | 12/1 |
| Be as | complete and accurate as possib | e. If two married people are filing together, both are equa | ally responsible for s | upplying correct info | rmation. If |
| | space is needed, copy the Additio and case number (if known). | nal Page, fill it out, number the entries, and attach it to t | nis form. On the top | of any additional pa | ges, write your |
| | Do any creditors have claims se | cured by your property? | | | |
| | - | it this form to the court with your other schedules. You hav | e nothing else to rep | ort on this form. | |
| | Yes. Fill in all of the information | | | ore orrano rorrin | |
| | <u> </u> | 500W. | | | |
| Part | | | | 0.4 | 0.1.0 |
| 2. | | or has more than one secured claim, list the creditor an one creditor has a particular claim, list the other creditors in | Column A Amount of claim | Column B Value of | Column C Unsecured |
| | | claims in alphabetical order according to the creditor's name. | Do not deduct the | collateral | portion |
| | | | value of collateral. | that supports this claim | If any |
| 2.1 | ALLY FINANCIAL | Describe the manager that are made the plain. | \$13,329.00 | \$7,750.00 | \$5,579.00 |
| | Creditor's Name | Describe the property that secures the claim: 2013 Ford Focus | ψ.ο,οΞο.οο | <u> </u> | <u> </u> |
| | PO BOX 380901 Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | | Contingent | | | |
| | BLOOMINGTON MN 55438 | Unliquidated | | | |
| | City State ZIP Code Who owes the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Nature of lien. Check all that apply. | | | |
| | Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| | Debtor 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates | Other (including a right to offset) | | | |
| | to a community debt Date debt was 7/2017 | | | | |
| | incurred | Last 4 digits of account number4103 | | | |
| 2.2 | ONEMAIN Creditor's Name | Describe the property that secures the claim: | \$10,240.00 | \$4,500.00 | \$5,740.00 |
| | PO BOX 1010 | 2006 Buick LaCrosse | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | EVANCULLE IN 47706 | Unliquidated | | | |
| | EVANSVILLE IN 47706 City State ZIP Code | Disputed | | | |
| | Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| | Debtor 1 only | , | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| | At least one of the debtors | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | and another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt Date debt was 3/2017 | Other (including a right to offset) | | | |
| | incurred 3/2017 | Last 4 digits of account number0896 | | | |
| | Add the dollar value of y | our entries in Column A on this page. Write that number | \$23,569.00 | | |

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| Fill i | n this infor | mation to identify your c | ase: | | | | | |
|------------|--|---|--|--|--|--------------------------|-------------------|-----------------------------|
| Deb | tor 1 | Vocie | | White | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ed States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | | (State) | | | | |
| (If knd | e number own) | - | | | | | | |
| Off | icial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| Sc | hedu | ule E/F: Cre | ditors Who | Have Uns | ecured Claims | | | 12/15 |
| Form clain | 106A/B) and the thick that are the thick that are the thick the thick that the thick t | and on Schedule G: Exe e listed in Schedule D: C | cutory Contracts and Une reditors Who Hold Claims tach the Continuation Pa | expired Leases (Officials Secured by Property | m. Also list executory contracts al Form 106G). Do not include a . If more space is needed, copy e top of any additional pages, v | ny credito the Part y | rs with partia | ally secured it out, number |
| 1. | | reditors have priority un Go to Part 2. | secured claims against y | ou? | | | | |
| | | | | | | | | |
| 2. | listed, idea As much Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit | ty and nonpriority amou ding to the creditor's na particular claim, list the | | both priorit | ty and nonpric | ority amounts. |
| | | | | | | Total | Priority | Nonpriority |

claim

amount

amount

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| Debte | or 1 Vocie | White | Case number (if known) | |
|-------------|---|----------------|---|-------------------|
| | First Name Middle Name | Last Name | | |
| Part | 2: List All of Your NONPRIORITY Unsecured Cla | ıms | | |
| Į | Do any creditors have nonpriority unsecured claims again No. You have nothing to report in this part. Submit thi Ves. | - | court with your other schedules. | |
| 4. I | List all of your nonpriority unsecured claims in the alphal unsecured claim, list the creditor separately for each claim. For | each claim lis | r of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already incart 3.If you have more than four priority unsecured claims fill out | cluded in Part 1. |
| | | | | Total claim |
| 4.1 | CAPITALONE Nonpriority Creditor's Name | | Last 4 digits of account number 5654 | \$303.00 |
| | c/o Pollack & Rosen, P.C | | When was the debt incurred? 12/2006 | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | 1825 Barrett Lakes Blvd Suite 510 | | Contingent | |
| | KennesawGeorgia30144CityStateZip Code | | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | 1 | ✓ Other. Specify CreditCard | |
| | ✓ No | · | | |
| | Yes | | | |
| 4.2 | CBNA | | | \$277.00 |
| 7.2 | Nonpriority Creditor's Name | | Last 4 digits of account number 0462 | Ψ277.00 |
| | Po Box 6497 Number Street | | When was the debt incurred? 2/2017 | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Sioux Falls South Dakota 57117 | | Contingent | |
| | City State Zip Code | | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | • | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 블 | | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | | debts Other. Specify CreditCard | |
| | Is the claim subject to offset? No | | Other. Specify CreditCard | |
| | Yes | | | |
| 4.0 | <u> </u> | | | Ф0.00 |
| 4.3 | COMENITY BANK/ROOMPLCE Nonpriority Creditor's Name | | Last 4 digits of account number 9215 | \$0.00 |
| | PO BOX 182789 Number Street | | When was the debt incurred? 5/2014 | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | OOLLIMBUO OLI 10040 | | Contingent | |
| | COLUMBUS Ohio 43218 City State Zip Code | | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | [| Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar | |
| | | · | debts Other. Specify CreditCard CreditCard | |
| | Is the claim subject to offset? ✓ No | | Other. Specify | |
| | Yes | | | |

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Case number (if known) Debtor 1 Vocie First Name White Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5. followed by 4.6. and so forth

| | After listing any entries on this page, number them beginning wit | n 4.5, followed by 4.6, and so forth. | lotal claim |
|-----|--|---|-------------|
| 4.4 | CRDTSHPINC Nonpriority Creditor's Name | Last 4 digits of account number 3474 | \$2,544.00 |
| | 221 W. 6TH STREET | When was the debt incurred? 12/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | AUSTIN Texas 78701 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify36 InstallmentLoan | |
| | ✓ No | _ | |
| | Yes | | |
| 4.5 | CREDIT FIRST N A | Last 4 digits of account number 5616 | \$0.00 |
| | Nonpriority Creditor's Name 6275 EASTLAND RD | When was the debt incurred? 11/1994 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | BROOKPARK Ohio 44142 City State Zip Code | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | FIRST PREMIER BANK | Last 4 digits of account number 6860 | \$640.00 |
| | Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 | When was the debt incurred? 4/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | c/o Kelly Lukason | Contingent | |
| | Saint Cloud Minnesota 56302 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | No | | |
| | Yes | | |

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Debtor 1 Vocie White Case number (if known)
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | |
|--------|--|---|----------|--|--|--|--|
| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | | | |
| 4.7 | FIRST PREMIER BANK | Last 4 digits of account number 1794 | \$445.00 | | | | |
| | Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 | When was the debt incurred? 12/2008 | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | c/o Kelly Lukason | Contingent | | | | | |
| | Saint Cloud Minnesota 56302 | \(\text{'} \) | | | | | |
| | City State Zip Code | Unliquidated | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | | | |
| | <u>'</u> | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | Student loans | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Is the claim subject to offset? | Other. Specify CreditCard | | | | | |
| | ✓ No | | | | | | |
| | Yes | | | | | | |
| 4.8 | GO FINANCIAL | Lock A digita of account number 20001 | \$0.00 | | | | |
| | Nonpriority Creditor's Name | Last 4 digits of account number 3001 | | | | | |
| | Po Box 29018 Number Street | When was the debt incurred? 12/2013 | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| | PhoenixArizona85038CityStateZip Code | Unliquidated | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | Student loans | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Is the claim subject to offset? | Other. Specify 034 Automobile | | | | | |
| | ✓ No | _ | | | | | |
| | Yes | | | | | | |
| 4.0 | | | Φ0.00 | | | | |
| 4.9 | Great American Finance Nonpriority Creditor's Name | Last 4 digits of account number 9576 | \$0.00 | | | | |
| | 20 N Wacker Dr, Ste 2275 | When was the debt incurred? 5/2014 | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| | Chicago Illinois 60606 | Unliquidated | | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | | | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | | Debts to pension or profit-sharing plans, and other similar | | | | | |
| | Check if this claim relates to a community debt | debts Other. Specify 018 InstallmentLoan | | | | | |
| | Is the claim subject to offset? | V Other. Opening 010 installmentLoan | | | | | |
| | | | | | | | |
| | Yes | | | | | | |

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 MERRICK BANK CORP \$1,028.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9201 When was the debt incurred? 5/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **OLD BETHPAGE** New York 11804 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.11 ONEMAIN \$0.00 Last 4 digits of account number 0896 Nonpriority Creditor's Name PO BOX 1010 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **EVANSVILLE** Indiana 47706 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 048 InstallmentLoan Is the claim subject to offset? **✓** No Yes PERSONAL FINANCE CO. 4.12 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 10945 S CICERO AVE When was the debt incurred? 8/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent OAK LAWN 60453 Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 013 InstallmentLoan Is the claim subject to offset?

No Yes

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 PERSONAL FINANCE CO. \$0.00 Last 4 digits of account number 2601 Nonpriority Creditor's Name 10945 S CICERO AVE When was the debt incurred? 9/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent OAK LAWN Illinois 60453 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 024 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.14 PERSONAL FINANCE/MARIN \$1,594.00 Last 4 digits of account number 1720 Nonpriority Creditor's Name 8211 TOWN CENTER DR When was the debt incurred? 8/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BALTIMORE** Maryland 21236 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify _____ 018 InstallmentLoan Is the claim subject to offset? **✓** No Yes PREFERRED CR 4.15 \$4,077.00 Last 4 digits of account number Nonpriority Creditor's Name POB 1679 When was the debt incurred? 11/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent ST CLOUD 56302 Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 48 InstallmentLoan Is the claim subject to offset? No **|**

Yes

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Santander Consumer USA \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 961245 When was the debt incurred? 5/2010 Number Street As of the date you file, the claim is: Check all that apply. Attn: Abel Marin Contingent Fort Worth Texas 76161 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 071 Automobile Is the claim subject to offset? **✓** No Yes 4.17 SPRINGLEAF FINANCIAL S \$0.00 Last 4 digits of account number 0896 Nonpriority Creditor's Name 7581 HIGHWAY 85 STE 30 When was the debt incurred? 6/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **RIVERDALE** Georgia 30274 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 036 InstallmentLoan Is the claim subject to offset? **✓** No Yes SPRINGLEAF FINANCIAL S 4.18 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 7581 HIGHWAY 85 STE 30 When was the debt incurred? 2/2015 Number As of the date you file, the claim is: Check all that apply. Contingent RIVERDALE 30274 Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 036 InstallmentLoan Is the claim subject to offset? No

Yes

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name POB 105555 When was the debt incurred? 6/2006 Street Number As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30348 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ CreditCard Is the claim subject to offset? **✓** No Yes 4.20 TRONIX CNTRY \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 8001 FORBES PL #211 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent SPRINGFIELD Virginia 22151 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt ✓ Other. Specify _____ UnknownLoanType Is the claim subject to offset? **✓** No Yes WEBBNK/FHUT 4.21 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 6250 RIDGEWOOD ROA When was the debt incurred? 7/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? No

Yes

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 Debtor 1 First Name
 Vocie Middle Name
 White Last Name
 Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$10,908.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$10,908.00 6j. Total. Add lines 6f through 6i.

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------|---------------------------|-------------|-------------|----------|--|
| Debtor 1 | Vocie | | Whit | te | |
| | First Name | Middle Name | Last | Name | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last | Name | |
| United States E | Bankruptcy Court for the: | Northern | District of | Illinois | |
| | | | | (State) | |
| Case number | | | | | |
| (If known) | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | DC | ocument i | age 33 c | 7 70 | |
|---------------------------------|---------------------------|--------------------------------|------------------------------|-------------|--|------|
| Fill in this info | mation to identify your c | ase: | | | | |
| Debtor 1 | Vocie | | White | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Otate) | | | |
| | | | | | Check if this amended filing | |
| Official | Form 106H | | | | | |
| Schedul | e H: Your Cod | lebtors | | | 1 | 2/15 |
| 1. Do you ha | | ou are filing a joint case, do | · | | or.) nunity property states and territories include Arizona, Californi | ia |
| Idaho, Lo | | cico, Puerto Rico, Texas, W | | - ' | and territories installed and territories installed and territories | α, |
| | | er spouse, or legal equiva | alent live with you a | t the time? | | |
| ✓ | No | | | | | |
| | Yes. In which communit | y state or territory did yo | u live? | Fill i | n the name and current address of that person. | |
| | Name of your spouse, f | ormer spouse, or legal equ | ivalent | | | |
| | Number Street | | | | | |
| | City | State | Z | Zip Code | | |
| | | - | • | | pouse is filing with you. List the person shown in line 2 sted the creditor on <i>Schedule D</i> (Official Form 106D), | |

Check all schedules that apply:

Column 2: The creditor to whom you owe the debt

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

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| | | | | | -3 | _ | | |
|---|---|--|-----------------------|---------|----------------|-----------------|--|-------------------------|
| Fill in this | information to identify | your case: | | | | | | |
| Debtor 1 | Vocie | | White | | | | | |
| | First Name | Middle Name | Last N | lame | | Che | eck if this is: | |
| Debtor 2 | ng) =: | | | | | | An amended filing | |
| (Spouse, ii iiii | ^{ng)} First Name | Middle Name | Last N | lame | | | • | act potition abouter 10 |
| | es Bankruptcy Court for | Northern | _ District of III | | | | A supplement showing po expenses as of the follow | |
| the: Case numb | er | | (3 | State) | | | · | |
| (lf known) | | | | | | | MM / DD / YYYY | |
| Officia | l Form 106I | | | | | | | |
| Sched | ule I: Your In | come | | | | | | 12/15 |
| information spouse. If r number (if | n about your spouse. I | | d your spou | se is ı | not filing w | ith you, do | not include information | n about your |
| | our employment | | Debtor 1 | l | | | Debtor 2 | |
| informa | information. | Employment status | Emplo | nved. | | | Employed | |
| | If you have more than one job, attach a separate page with | . , | | mploye | ed. | | Not Employed | |
| informa | tion about additional | | V Not 2 | проуч | , d | | Trot Employed | |
| employe | ers. | Occupation | | | | | | |
| | part time, seasonal, or ployed work. | Employer's name | | | | | _ | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | |
| | | | Number St | reet | | | Number Street | |
| | | | | | | | | |
| | | | | | | | | |
| | | | City | | State | Zip Code | City | tate Zip Code |
| | | How long employed | | | | | | |
| | | there? | - | | | | | |
| Part 2: 0 | Give Details About N | Monthly Income | | | | | | |
| | monthly income as of t less you are separated. | the date you file this forr | n. If you have | nothir | ng to report | for any line, v | write \$0 in the space. Incl | ude your non-filing |
| | our non-filing spouse have be, attach a separate she | e more than one employer, et to this form. | , combine the | inform | nation for all | employers fo | · | below. If you need |
| | | | | | For Del | otor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (before, calculate what the monthly | | 2. | | \$0.00 | - 3 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 | |
| 3. Estim | ate and list monthly ove | rtime pay. | | 3. | | + \$0.00 | _ | |
| 4. Calculate gross income. Add line 2 + line 3. | | | | 4. | | \$0.00 | |] |

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| Debtor 1 Vocie | Whit | | Case numbe | er (if | |
|---|---|-----------------|-----------------------|-----------------------------------|-------------------------|
| First Name | Middle Name Last | Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | ı | → 4. = | \$0.00 | | |
| 5. List all payroll deduction | | | | | |
| 5a. Tax, Medicare, and S | Social Security deductions | 5a. | \$0.00 | | |
| 5b. Mandatory contribut | tions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contribution | ons for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayment | s of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | | 5e. | \$0.00 | | |
| 5f. Domestic support ob | ligations | 5f. | \$0.00 | | |
| 5g. Union dues | | 5g. | \$0.00 | | |
| 5h. Other deductions. S | pecify: | 5h. + | \$0.00 + | | |
| 6. Add the payroll deductio +5h. | ons. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5 | 5g 6. <u> </u> | \$0.00 | | |
| 7. Calculate total monthly | take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | |
| 8. List all other income reg | • | | | | |
| business, profession | ital property and from operating a , or farm each property and business showing | | | | |
| | y and necessary business expenses, and | 8a. <u> </u> | \$0.00 | | |
| 8b. Interest and dividen | ds | 8b. | \$0.00 | | |
| dependent regularly | | | | | |
| divorce settlement, and | | 8c | \$0.00 | | |
| 8d. Unemployment com | pensation | 8d | \$0.00 | - | |
| 8e. Social Security | | 8e | \$1,648.00 | - | |
| Include cash assistanc cash assistance that yo | esistance that you regularly receive the and the value (if known) of any non- tou receive, such as food stamps (benefits al Nutrition Assistance Program) or | 8f. | \$0.00 | | |
| 8g. Pension or retireme | nt income | 8g. | \$840.00 | | |
| 8h. Other monthly incom | | 8h. + | \$308.00 + | | |
| • | d lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h | | \$2,796.00 | | |
| | · · | L | | | |
| 10. Calculate monthly incor Add the entries in line 10 f | ne. Add line 7 + line 9. for Debtor 1 and Debtor 2 or non-filing spous | 10. se | \$2,796.00 | = | \$2,796.00 |
| Include contributions from friends or relatives. | contributions to the expenses that you list in an unmarried partner, members of your hou into already included in lines 2-10 or amounts | usehold, your d | ependents, your roomi | | |
| Specify: | a day irrotadd irr irrod 2 10 or arrotand | aro not av | and to pay expenses | | 1. + \$0.00 |
| | | | | | |
| | last column of line 10 to the amount in lir Summary of Schedules and Statistical Summ | | | | \$2,796.00 |
| | | | | | Combined monthly income |
| | ase or decrease within the year after you | file this form? | | | |
| ✓ No. | | | | | |
| Yes. Explain: | | | | | |
| | | | | | |

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| Debtor 1 | Vocie | | White | Case number (if |
|----------|------------|-------------|-----------|-----------------|
| | First Name | Middle Name | Last Name | known) |

Part 2: Give Details About Monthly Income

Official Form 106I. Additional page.

| | For Debtor 1 | non-filing spouse |
|------------------------------------|--------------|-------------------|
| 8h.Other monthly income. Specify: | | |
| 1. Car Payment from Estranged Wife | \$291.00 | |
| 2. Income Tax | \$0.00 | |
| 3. Pro-Rated Income Tax Refund | \$17.00 | |

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| | | Do | cument Page 37 of | 70 | | |
|--|---|---|---|--------------------------------------|---------------------------------------|-----------|
| Fill in this infor | mation to identify y | our case: | | | | |
| Debtor 1 | Vocie | | White | | | |
| Debtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | | |
| United States B | ankruptcy Court for | the: Northern | District of Illinois (State) | A supplement show expenses as of the | wing post-petition chefollowing date: | napter 13 |
| Case number (If known) | | | | MM / DD / YYYY | <u></u> | |
| | Form 106 e J: Your E | | | | | 12/15 |
| Be as complete information. If i (if known). Ans | and accurate as | possible. If two married peopleded, attach another sheet to | e are filing together, both are eq his form. On the top of any addit | | - | |
| 1. Is this a join | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live ir | a separate household? | | | | |
| | ¬ No | | | | | |
| - | → Yes. Debtor 2 mu | ust file Official Forms 106J-2, <i>Ex</i> | penses for Separate Household of L | Debtor 2. | | |
| 2. Do you have | e dependents? | No | | | | |
| Do not list D Debtor 2. | · <u>L</u> | Yes. Fill out this information f each dependent | Or Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent liv | ve |
| | enses include f people other | No | | | | |
| than yourself and dependents | d your | Yes | | | | |
| | | ing Monthly Expenses | | | | |
| _ | f a date after the l | | ss you are using this form as a su supplemental Schedule J, check | • • | - | |
| | • | on-cash government assistan led it on <i>Schedule I: Your Inco</i> | - | | Your exp | penses |
| | or home ownershi or the ground or lot. | | . Include first mortgage payments a | and | 4. | \$900.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Vocie
 White
 Case number (if known)

 Last Name
 Last Name

| 6. Utilities: 6a. Eccirotry, heat, natural gas 6a. \$292.0t 6b. Water, sewer, garbage collection 6b. \$0.0t 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.0t 6d. Other. Specify: 6d \$0.0t 7. Food and housekeeping supplies 8. \$0.0t 8. Childcare and children's education costs 8. \$0.0t 9. Citoting, laundry, and dry cleaning 9. \$50.0t 10. Personal care products and services 10. \$75.0t 11. Medical and dental expenses 11. \$10.0t 11. Medical and dental expenses 11. \$10.0t 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$280.0t Do not include car payments 13. \$0.0t 14. Charitable contributions and religious donations 14. \$0.0t 15. Insurance. 15a \$0.0t 15. Insurance. 15a \$0.0t 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15a \$0.0t 15c. Vehicle insurance. Specify: 15a \$0.0t 15c. Vehicle insurance. Specify: 15a \$0.0t 15c. Vehicle insurance. Specify: 17c </th <th>First Name Middle Name</th> <th>Last Name</th> <th></th> <th></th> | First Name Middle Name | Last Name | | |
|--|--|--|-----|---------------|
| 6. Utilities: 6.a. Ectoritority, heat, natural gas 6.a. S292.01 6.b. Water, sewer, garbage collection 6b. S0.00 6c. Telephone, cell phone, Intermet, satellite, and cable services 6c. S75.00 6d. Other, Specify: 6d 7. Food and housekeeping supplies 7. S370.00 8. Childcare and children's education costs 8. S0.00 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 11. Medical and dental expenses 12. \$280.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$280.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15. Insurance. 15. \$0.00 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15. Lyeline insurance. Specify: 15a \$0.00 15. Lyeline insurance. Specify: 15a \$0.00 15. Lyeline insurance. Specify: 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 | | | | Your expenses |
| 6a. Electricity, heat, natural gas 6a. \$292.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellilis, and cable services 6c. \$75.00 6c. Other, Specify: 6d \$50.00 7. Food and housekeeping supplies 7. \$370.00 8. Childcare and children's education costs 8. \$50.00 9. Clothing, Leundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$280.00 15. Insurance. 12. \$30.00 15. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 15. Insurance. 15. \$0.00 15. Lie lini insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. Life insurance 15a \$0.00 15b. Vehicle insurance \$0.00 \$0.00 15c. Vehicle insurance \$0.00 \$0.00 15c. Vehicle i | 5. Additional mortgage payments for your residence, suc | h as home equity loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6c. \$50.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.00 6c. \$ | 6. Utilities: | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.00 6c. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 8. \$0.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, Isundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$280.00 Do not include a payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. So.00 15b. Health insurance 15c. Vehicle insurance 15c. So.00 \$0.00 15. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15. Car payments for Vehicle 1 17a. So.00 \$0.00 \$0.00 | 6a. Electricity, heat, natural gas | | 6a. | \$292.00 |
| 6d. Other. Specify | 6b. Water, sewer, garbage collection | | 6b. | \$0.00 |
| 7. Food and housekeeping supplies 7. \$370.00 8. Childcare and children's education costs 8. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$280.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance educated from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Car payments for Vehicle a taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments: 17a \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 2 17a \$0.00 17c. Other. Specify: 17a \$0.00 | 6c. Telephone, cell phone, Internet, satellite, and cable ser | vices | 6c. | \$75.00 |
| 7. Food and housekeeping supplies 7. \$370.00 8. Childcare and children's education costs 8. \$50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$280.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance educated from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Car payments for Vehicle a taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments: 17a \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 2 17a \$0.00 17c. Other. Specify: 17a \$0.00 | 6d. Other. Specify: | | 6d | \$0.00 |
| 9. Clothing, laundry, and dry cleaning 9. S50.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include care payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$0.00 15b. Health insurance 15c. \$0.00 15c. Vehicle insurance \$pacify: 15c. \$0.00 15d. Other insurance. \$pacify: 15c. \$0.00 15d. Other insurance. \$pacify: 15c. \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17d. Car payments for Vehicle 1 17a \$291.00 17d. Car payments for Vehicle 2 17b \$0.00 17d. Other. Specify: 17c. Other. Speci | 7. Food and housekeeping supplies | | 7. | \$370.00 |
| 10. Personal care products and services 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$280.01 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 15. Insurance. 15. Insurance. 15. Insurance. 15. Insurance. 15. On thick de insurance deducted from your pay or included in lines 4 or 20. 15. Health insurance 15. Health insurance 15. Insurance. 15. On thick de insurance. 15. Insurance. 15. On the insurance. 15. On thick de insurance. 16. On thick de insurance. 17. On thick de fax deducted from your pay or included in lines 4 or 20. 17. Other. Specify: 17. Other. Specify: 17. Other. Specify: 17. On thick de insurance. 17. On thick de insurance. 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 18. Your payments of uniform, maintenance, and support the you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property of the substance. 20b. Robot. 20c. Property, homeowner's, or renter's insurance. | 8. Childcare and children's education costs | | 8. | \$0.00 |
| 11. Medical and dental expenses | 9. Clothing, laundry, and dry cleaning | | 9. | \$50.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 16 \$0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Sound 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20a. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20b. Real estate taxes. 20b. Sound 20c. Property, homeowner's, or renter's insurance | 10. Personal care products and services | | 10. | \$75.00 |
| Do not include car payments 13. | 11. Medical and dental expenses | | 11. | \$10.00 |
| 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. Insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$153.00 15c. Vehicle insurance. Specify: 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5pecify: Specify: 16 17. Installment or lease payments: 17a. \$291.00 17a. Car payments for Vehicle 1 17a. \$291.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 5pecify: 19. \$0.00 20a. Mortgages on other property 20a. \$0.00 \$0.00 20b. Real estate taxes. 20b. \$0.00 \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 \$0.00 | | are. | 12. | \$280.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$153.00 15c. Vehicle insurance \$15c \$153.00 15d. Other insurance. Specify: 15d. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 \$0.00 17c. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$291.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17c \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. \$0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20c. Property, homeowner | 13. Entertainment, clubs, recreation, newspapers, maga | zines, and books | 13. | \$0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$153.00 15c. Vehicle insurance 15c \$153.00 15c. Vehicle insurance. Specify: 15d \$0.00 1 | 14. Charitable contributions and religious donations | | 14. | \$0.00 |
| 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$153.00 15d. Other insurance. Specify: 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 Specify: 16 \$0.00 17. Installment or lease payments: 16 17. Local payments for Vehicle 1 17a \$291.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 Specify: 19. \$0.00 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 15. Insurance. Do not include insurance deducted from your pay or inclu | ded in lines 4 or 20. | | |
| 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Tinstallment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 | 15a. Life insurance | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | 15b | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20a. Mortgages on other property 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance | 15c. Vehicle insurance | | 15c | \$153.00 |
| \$0.00 | 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 | 16. Taxes. Do not include taxes deducted from your pay or in | ncluded in lines 4 or 20. | | |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$291.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 | Specify: | | 16 | \$0.00 |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 17. Installment or lease payments: | | | |
| 17c. Other. Specify: 17d \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 17a. Car payments for Vehicle 1 | | 17a | \$291.00 |
| 17d. Other. Specify: | 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17d. Other. Specify: | 17c. Other. Specify: | | 17c | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 47.1 011 0 15 | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 | | | 18 | \$0.00 |
| Specify: | | • | 10. | |
| 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | | | 19. | \$0.00 |
| 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 20.Other real property expenses not included in lines 4 of | or 5 of this form or on Schedule I: Your Income. | | |
| 20c. Property, homeowner's, or renter's insurance 20c \$0.00 | 20a. Mortgages on other property | | 20a | \$0.00 |
| | 20b. Real estate taxes. | | 20b | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20c. Property, homeowner's, or renter's insurance | | 20c | \$0.00 |
| ,,,,,,, | 20d. Maintenance, repair, and upkeep expenses. | | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues 20e \$0.00 | 20e. Homeowner's association or condominium dues | | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Vocie | | | White | Case number (if known) | | |
|-----------------------|--------------------------|--------------------------|------------------------------|------------------------|-----|------------|
| First I | Name | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expense | es. | | | | \$2,496.00 |
| | nes 4 through 21. | | | | | \$0.00 |
| . , | line 22 (monthly expens | | | \$2,496.00 | | |
| 22c. Add lii | ne 22a and 22b. The res | sult is your monthly exp | enses. | | 22. | |
| 23. Calculate | your monthly net inco | me. | | | | |
| 23a. Copy | line 12 (your combined | monthly income) from S | Schedule I. | | 23a | \$2,796.00 |
| 23b. Copy | your monthly expenses | from line 22 above. | | | 23b | \$2,496.00 |
| | | ses from your monthly in | icome. | | | \$300.00 |
| The re | esult is your monthly ne | t income. | | | 23c | |
| | | | oan within the year or do yo | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | Vocie | | White | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | | | |
| Case number | - | | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | | |
|-----|---|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and | | | | | | |
| | that they are true and correct. | | | | | | | |
| X | /s/ Vocie White | * | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 2/2/2018 | Date | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | |

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| Fill i | n this in | formation to | identify your o | ase: | | | | | |
|-----------------|----------------|----------------|------------------|---------------------|---|------------------|------------|----------|----------------------|
| Deb | tor 1 | Vocie | | | White | | | | |
| Deb | tor 2 | First Nar | ne | Middle | Name Last Na | ame | | | |
| | use, if filing | g) First Nar | ne | Middle | Name Last N | ame | | | |
| Unit | ed State | es Bankruptcy | Court for the: | Northern | District of Illi | nois tate) | | | |
| Case (If knd | e numbe | er | | | | tatoj | | | |
| , | • | | 107 | | | | | | Check if this is a |
| <u>Ot</u> | ticia | l Form | 107 | | | | | | amended filing |
| Sta | atem | ent of | Financia | I Affairs | for Individuals | Filing fo | r Bankru | ıptcy | 04/1 |
| info | rmatior | n. If more sp | | ed, attach a sep | narried people are filin parate sheet to this fo | | | | |
| Par | ti: Gi | ive Details | About Your | Marital Status | and Where You Live | ed Before | | | |
| 1. | What | is your curr | ent marital sta | atus? | | | | | |
| | | Married | | | | | | | |
| | ☑ ▷ | Not married | | | | | | | |
| 2. | Durin | g the last 3 | years, have yo | ou lived anywhei | e other than where you | live now? | | | |
| | | No | | | | | | | |
| | ☑ A | es. List all o | f the places yo | ou lived in the las | st 3 years. Do not includ | e where you live | now. | | |
| | | Debtor 1: | | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | - | 20210 | | | there | 202101 21 | | | there |
| | | | | | | Same as | s Debtor 1 | | Same as Debtor 1 |
| | 8 | 3808 S. Herm | itage | | F | | | | F |
| | N | Number Stree | t | | From To | Number Stre | eet | | From To |
| | - | Chicago | Illinois | 60626 | | | | _ | |
| | _ | City | State | Zip Code | | City | State | Zip Code | |
| | | | | | | Same as | s Debtor 1 | | Same as Debtor 1 |
| | <u> </u> | Number Stree | <u> </u> | | From | Number Stre | eet | | From |
| | <u>-</u> | | | | То | | | | То |
| | - | 21 | Obsta | 7:- 0 - 1- | | 0.1 | Obsta | 7'- 0-1- | |
| | | City | State | Zip Code | | City | State | Zip Code | |
| 3. | | | | | pouse or legal equivale: siana, Nevada, New Mexi | | | | |
| | ✓ No | | -, | , , | , | | , 9 | | |
| | Ľ. | | e you fill out S | chedule H: Your | Codebtors (Official For | m 106H). | | | |

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, For last calendar year: commissions, commissions, 2017 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) Est. YTD SSI \$1,648.00 From January 1 of current year until Est. YTD Army the date you filed for bankruptcy: \$840.00 Retirement YTD SSI \$19,776.00 For last calendar year: YTD Army Retirement \$10,080.00 (January 1 to December 31, 2017) YTD SSI \$19,776.00 For the calendar year before that: YTD Army Retirement \$10,080.00 (January 1 to December 31, 2016

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White Debtor 1 Vocie __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | Vocie | | | Wh | nite | Case number | (if known) |
|--------------------|---|--|---|--|---|--|--|
| | First Name | | Middle Name | Las | t Name | | |
| Insi con age | iders include your r porations of which | elatives; ar you are ar or a busin | ny general partners n officer, director, p ess you operate as | ; relatives of any person in control, | general partners; par or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all payr | nents to a | ın insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| - | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | der? ude payments on o No Yes. List all payn | | ranteed or cosigner | | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Vocie White Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Vocie | White | Case number (if known) | |
|------|---|-----------------------------|--|---------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you No | | eank or financial institution, set off any amo | ounts from your |
| | Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | · |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 10 | Within 1 year before you filed for bankruptcy, was a | ny of your proporty in the | naccession of an assigned for the banefit o | foraditora a court |
| 12. | appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit o | creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| ebtor 1 | Vocie | | White | Case number (if know | wn) | |
|----------|--|--|--|-------------------------------|-----------------------------------|---------------------|
| | First Name Middle | Name | Last Name | <u> </u> | | |
| | | | | | _ | |
| . Wit | thin 2 years before you filed for bankı | ruptcy, did yo | ou give any gifts or contribu | tions with a total value | of more than \$600 | to any charity? |
| ~ | No | | | | | |
| - | | r contribution | | | | |
| | Yes. Fill in the details for each gift or | CONTIDUTION | | | | |
| | Gifts or contributions to charities | | Describe what you contri | buted | Date you | Value |
| | that total more than \$600 | | | | contributed | |
| | | | | | | |
| | Charity's Name | | | | | |
| | • | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State Zip | Code | | | | |
| | 1 | | | | | |
| rt 6: | List Certain Losses | | | | | |
| | | | | | | |
| Wit | thin 1 year before you filed for bankru | uptcy or since | e you filed for bankruptcy, d | id you lose anything be | cause of theft, fire, | other disaster, or |
| gar | mbling? | | | | | |
| | l No | | | | | |
| ✓ | | | | | | |
| Ш | Yes. Fill in the details. | | | | | |
| | Describe the property you lost and | | Describe any insurance of | | Date of your | Value of property |
| | how the loss occurred | | Include the amount that ins | | loss | lost |
| | | | pending insurance claims of | in line 33 of <i>Schedule</i> | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | | | | | |
| Wit | List Certain Payments or Trans thin 1 year before you filed for bankru out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition p | uptcy, did you a bankruptcy | y petition? | | | anyone you consulte |
| . Wit | thin 1 year before you filed for bankruput seeking bankruptcy or preparing lude any attorneys, bankruptcy petition p | uptcy, did you a bankruptcy | y petition? | | | anyone you consulte |
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| Debtor | 1 Vocie | | | number (if known) | |
|----------|--|------------------------|---|---|------------------------------|
| | First Name | Middle Name | Last Name | | |
| h | ithin 1 year before you file by you deal with your cre o not include any payment o | ditors or to make paym | | f pay or transfer any property to | anyone who promised to |
| | Yes. Fill in the details. | | | | |
| L | 1 es. I ili il il ile details. | | | | |
| | | | Description and value of any proper transferred | ty Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | |
| | Number Street | | | | |
| | | | • | | |
| | City State | Zip Code | • | | |
| <u> </u> | nd transfers that you have all No Yes. Fill in the details. | | Description and value of property transferred | Describe any property or payments received or debts | - |
| | | | | in exchange | made |
| | Person Who Received Tr | ransfer | | | |
| | Number Street | | | | |
| | City State Person's relationship to y | • | | | |
| | Person Who Received Tr | ransfer | | | |
| | Number Street | | | | |
| | | | | | |
| | City State Person's relationship to y | • | | | |
| b | ithin 10 years before you to the state of the called asset-page. No Yes. Fill in the details. | | d you transfer any property to a self-set | tled trust or similar device of w | hich you are a |
| L | | | B | | - |
| | | | Description and value of the prope | erty transferred | Date transfer was made |
| | Name of trust | | | | |

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number account was instrument before closed, sold, closing or moved, or transfer transferred Bank of America XXXX-\$ 0.00 Person Who Was Paid Savings 9000 SOUTHSIDE BLVD BLDG Number Street Money market Brokerage JACKSONVILLE Florida 32256 Other Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? ■ No Name of Financial Institution Name Number Street Number Street City State Zip Code City State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Name of Storage Facility Name Number Street Number Street City State Zip Code City State Zip Code

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White Debtor 1 Vocie Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code

City

State

Zip Code

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| Deb | tor 1 | | | | Wh | ite | Cas | e number <i>(ii</i> | fknown) | | |
|------|-------|---|----------------|------------------------|----------------|---------------|-------------------|---------------------|---------------|---------------|----------------------------------|
| | | First Name | | Middle Name | Last | t Name | | | | | _ |
| 26. | Hav | e you been a part | y in any judic | cial or administra | ative procee | eding under | any environmen | ital law? In | clude settler | ments and ord | lers. |
| | 넴 | No Yes. Fill in the def | tails. | | | | | | | | |
| | | | | • | Court or age | ency | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStree | t | _ | | | | Concluded |
| | | _ | | ī | City | State | Zip Code | | | | |
| Part | 11: | Give Details Al | oout Your E | Business or Co | nnections | to Any Bu | siness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a b | ousiness or | have any of the | following c | onnections t | o any busines | s? |
| | | | | mployed in a tra | | | - | ull-time or p | oart-time | | |
| | | A member of A partner in a | | oility company (L o | LC) or limited | а наріііту ра | irtnersnip (LLP) | | | | |
| | | An officer, di | rector, or ma | anaging executiv | - | | | | | | |
| | | An owner of | at least 5% c | of the voting or e | quity securiti | ies of a corp | ooration | | | | |
| | | No. None of the a Yes. Check all tha | | | details below | y for each h | oueineee | | | | |
| | ш | 163. Officer all the | ат арріу аро | ve and ill in the t | | | ire of the busine | SS | | | number Do not |
| | | | | | | | | | include So | cial Security | number or ITIN. |
| | | Business Name | | | | | | | EIIN. | | |
| | | Number Street | | | – Name | of account | ant or bookkeep | er | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | | , | | From | То | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ss | | | number Do not number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name — | of account | ant or bookkeep | er | Erom | To | |
| | | Oily | Oldio | 2.6 0000 | | | | | F10111 | To | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ss | | | number Do not number or ITIN. |
| | | Business Name | | | - | | | | EIN: | | |
| | | Number Street | | | - Name | of accounts | ant or bookkeep | er | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | acount | | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 Vocie | | White | Case number (if known) |
|-------------|--|--|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | creditors, or other parties. | | ou give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| | Yes. Fill in the details b | elow. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | | | | |
| | Number Street | | _ | |
| | City Sta | ate Zip Code | _ | |
| | Oity Oil | Zip oode | | |
| Part | 12: Sign Below | | | |
| t | true and correct. I understar a bankruptcy case can resul | nd that making a false sta It in fines up to \$250,000, | tement, concealing proper | nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ Vocie Signature of | | | Signature of Debtor 2 |
| | oignataro oi | 20010. | | Date |
| | Date 2/2/2 | 018 | | Date |
|]]] | Did you attach additional pa No Yes | ges to Your Statement of | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| [| Did you pay or agree to pay | someone who is not an at | torney to help you fill out b | ankruptcy forms? |
| [| ✓ No | | | |
| [| Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | | Northern District C | or illinois | |
|---------|---|---|---------------------------------|------------------------------|
| e | Vocie White | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATION | OF ATTORNEY F | OR DEBTOR |
| cor | rsuant to 11 U.S.C. § 329(a) and I npensation paid to me within one dered or to be rendered on behalt | year before the filing of the petit | ion in bankruptcy, or agreed to | be paid to me, for services |
| For | r legal services, I have agreed to a | ccept | | \$4,000.00 |
| Pri | or to the filing of this statement I | have received | | \$500.00 |
| Bal | ance Due | | | \$3,500.00 |
| 2. The | e source of the compensation pai | d to me was: | | |
| | Debtor | Other (specify) | | |
| 3. The | e source of the compensation pai | d to me is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the at members and associates of my I | pove-disclosed compensation wi aw firm. | th any other person unless the | ey are |
| | | e-disclosed compensation with a w firm. A copy of the agreement, ensation, is attached. | | |
| 5. In r | return for the above-disclosed fee a. Analysis of the debtor's finar bankruptcy; | , I have agreed to render legal ser ncial situation, and rendering adv | • | • • |
| | b. Preparation and filing of any | petition, schedules, statements | of affairs and plan which may b | pe required; |
| | c. Representation of the debtor | at the meeting of creditors and o | confirmation hearing, and any a | adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary proceedings and ot | her contested bankruptcy mat | ters; |
| 6. By | agreement with the debtor(s), the | above-disclosed fee does not in | clude the following services: | |
| | | | | |
| | | CERTIFICATIO | | |
| | ify that the foregoing is a comple in this bankruptcy proceedings. | te statement of any agreement or | r arrangement for payment to n | ne for representation of the |
| | 2/2/2018 | | /s/ Alicia Haro | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | White, Vocie Debtor(s) | Case No | Case No | | |
|-----------------|-------------------------|--|-------------------------------------|--|--|
| | | Chapter. | Chapter13 | | |
| | VERIFI | CATION OF CREDITOR MAT | RIX | | |
| Ti knowledge | | fy that the attached list of creditors is tr | ue and correct to the best of their | | |
| Date: | 2/2/2018 | /s/ White, Vocie White, Vocie Signature of Deb | otor | | |

ALLY FINANCIAL PO Box 130424 Saint Paul, MN, 55113

ONEMAIN PO BOX 1010 EVANSVILLE, IN, 47706

PREFERRED CR POB 1679 ST CLOUD, MN, 56302

CRDTSHPINC 221 W. 6TH STREET AUSTIN, TX, 78701

PERSONAL FINANCE/MARIN 8211 TOWN CENTER DR BALTIMORE, MD, 21236

MERRICK BANK CORP One Paces West Suite 1400 Atlanta, GA, 30339

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

CBNA Po Box 6497 Sioux Falls, SD, 57117

TRIBUTE POB 105555 ATLANTA, GA, 30348

WEBBNK/FHUT 6250 RIDGEWOOD ROA SAINT CLOUD, MN, 56303 Great American Finance 20 N Wacker Dr, Ste 2275 Chicago, IL, 60606

GO FINANCIAL Po Box 29018 Phoenix, AZ, 85038

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

CREDIT FIRST N A 6275 EASTLAND RD BROOKPARK, OH, 44142

SPRINGLEAF FINANCIAL S 7581 HIGHWAY 85 STE 30 RIVERDALE, GA, 30274

PERSONAL FINANCE CO. 10945 S CICERO AVE OAK LAWN, IL, 60453

COMENITY BANK/ROOMPLCE PO BOX 182789 COLUMBUS, OH, 43218

TRONIX CNTRY 8001 FORBES PL #211 SPRINGFIELD, VA, 22151

UNITED STATES BANKPUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

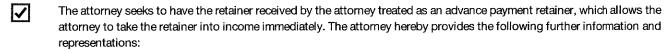
C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$61.76 for expenses, leaving a balance due of \$3,871.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Signed: | |
|----------------------------|---------------------------|
| /s/ Vocie White Coce White | |
| | /s/ Alicia Haro Olicu Haw |
| Debtor(s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Vocie | Whit Middle Name Last | te Case | number (if known) | |
|--|--|---|--|--|
| First Name | estions for Reporting Purposes | Name | | |
| Part 6: Answer These Que 16. What kind of debts do you have? | 16a. Are your debts primarily con "incurred by an individual property." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily but | imarily for a personal, fam usiness debts? Business destment or through the op | illy, or household purpose." debts are debts that you incurred eration of the business or invest | d to obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund No. | | ny exempt property is excluded and te to unsecured creditors? | d administrative |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,0 50,001-100, More than 10 | 000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 n \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | 001-\$10 billion 0,001-\$50 billion |
| ^{20.} How much do you estimate your liabilities to be? | | \$1,000,001-\$10 n \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | 001-\$10 billion 1,001-\$50 billion |
| Part 7: Sign Below | | | | |
| I have examined this petition, and I declare under penalty of perjury that the information provided is true ar correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me frout this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | pter 7, 11,12, or 13 oose to proceed ey to help me fill is petition. by fraud in |
| | /s/ Vocie White U (YU) Signature of Debtor 1 | w prove | Signature of Debtor 2 | |
| | Executed on 2/2/2018 MM / DD / Y | //// | Executed on | YY |

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| Debtor 1 | Vocie White | | and the second s | | |
|---------------------------------|--------------------------|-------------|--|-------------|------|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | | | • |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below | | | | | | |
|---|---|--|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| ☑ No | | | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | |
| | | | | | | |
| Under penalty of perjury, I declare that I have read t | the summary and schedules filed with this declaration and | | | | | |
| x /s/ Vocie White | Me × | | | | | |
| Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| Date 2/2/2018 | Date | | | | | |
| MM/DD/YYYY | MIM/DD/TTTT | | | | | |

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| Debtor | 1 Vocie | | | White | Case number (if known) |
|---------|---------------------------------|---------------------------------------|----------------|--|--|
| | First Name | Midd | le Name | Last Name | |
| | ithin 2 years reditors, or o | | kruptcy, did y | you give a financial stater | nent to anyone about your business? Include all financial institutions, |
| ¥ | No Voc Fillin | the details below. | | | |
| L. | 163.111111 | u ie details below. | | Date issued | |
| ٠ | | • | | Date Issued | |
| | Name | | | MM/DD/YYYY | - |
| | Number | Street | | | |
| | 0:1 | 01-1- | 7:- 0 | - Control of the Cont | |
| | City | State | Zip Code | | |
| Part 12 | Sign Bel | nw . | | | |
| a ba | and correct ankruptcy ca | /s/ Vocie White Signature of Debtor 1 | to \$250,000 | , or imprisonment for up t | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| | | | | | Date |
| | No Yes | | | f Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? t bankruptcy forms? |
| | Yes. Name o | f person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

The control of the co

Northern District of Illinois

| In re: | White, Vocie | Case No | | |
|-----------------|--------------|--|------------------|-------------------|
| Debtor(s) | | | | |
| | | Chapter. | Chapter | 13 |
| | VERIFIC | CATION OF CREDITOR MAT | RIX | |
| Th knowledge | | y that the attached list of creditors is tru | e and correct to | the best of their |
| Date: | 2/2/2018 | /s/ White, Vocie | Vocie | white |
| | | White, Vocie Signature of Debt | or | |

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| Debt | or 1 Vocie | White | Case number (if known) | | |
|--|---|-------------|---|-------------|--|
| | First Name Middle Name | Last Name | | | |
| 16. | . Calculate the median family income that applies to you. Follow these steps: | | | | |
| | 16a. Fill in the state in which you live. | Illinois | , | | |
| | 16b. Fill in the number of people in your household | l. <u>1</u> | | | |
| | 16c. Fill in the median family income for your state a | and size of | | \$51,317.00 | |
| | household | | a list of applicable median income amounts, go online | | |
| 17 | using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? | | | | |
| .,. | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | |
| Part | Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | | | | |
| 18. | Copy your total average monthly income from li | ne 11. | | \$840.00 | |
| 19. | Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | | |
| | 19a. If the marital adjustment does not apply, fill in 0 on line 19a. | | | -\$0.00 | |
| | 19b. Subtract line 19a from line 18. | | | \$840.00 | |
| 20. | Calculate your current monthly income for the year. Follow these steps: | | | | |
| | 20a. Copy line 19b. <u>\$840.00</u> | | | \$840.00 | |
| | Multiply by 12 (the number of months in a year). | | | x 12 | |
| | 20b. The result is your current monthly income for the year for this part of the form. | | | \$10,080.00 | |
| | 20c. Copy the median family income for your state and size of household from line 16c. \$51,317.00 | | | | |
| 21. | 1. How do the lines compare? | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | |
| | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. | | | | |
| Part 4: Sign Below | | | | | |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | |
| | * 1s/ Vocie White Vacce White * | | | | |
| | Signature of Debtor 1 Signature of Debtor 2 | | | | |
| | Date 2/2/2018 Date | | | | |
| | MM/DD/YYYY | _ | MM/DD/YYYY | | |
| | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | |